

**2014 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P13202

**FILED**  
**Jun 23, 2014**  
**Secretary of State**  
**CC7650080160**

**Entity Name:** WRS INFRASTRUCTURE & ENVIRONMENT, INC.

**Current Principal Place of Business:**

221 HOBBS STREET  
SUITE 108  
TAMPA, FL 33619

**Current Mailing Address:**

221 HOBBS STREET  
SUITE 108  
TAMPA, FL 33619 US

**FEI Number:** 62-1260585

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            SANTELLO, RICHARD  
Address        221 HOBBS STREET  
                 SUITE 108  
City-State-Zip: TAMPA FL 33619

Title            VP  
Name            ANDERSON, BRENT  
Address        221 HOBBS STREET  
                 SUITE 108  
City-State-Zip: TAMPA FL 33619

Title            TREASURER  
Name            FINN, BRIAN  
Address        221 HOBBS STREET  
                 SUITE 108  
City-State-Zip: TAMPA FL 33619

Title            SECRETARY  
Name            HALLISEY, JOHN  
Address        221 HOBBS STREET  
                 SUITE 108  
City-State-Zip: TAMPA FL 33619

Title            EXEC. VICE PRESIDENT  
Name            COPELAND, MICHAEL  
Address        221 HOBBS STREET  
                 SUITE 108  
City-State-Zip: TAMPA FL 33619

Title            VP  
Name            HOOPER , ANDREW  
Address        221 HOBBS STREET  
                 SUITE 108  
City-State-Zip: TAMPA FL 33619

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN FINN

**TREASURER**

**06/23/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date